

RUSSIAN PSYCHIATRY—ITS HISTORICAL
AND IDEOLOGICAL BACKGROUND *

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THE history of Russian culture cannot easily be understood unless one bears constantly in mind the special circumstances of its evolution. Russia is an old country, of course; she is rich in tradition and great events. But unlike the rest of Europe, she was never in intimate historical contact with the classical civilization of Greece and Rome, and the Byzantine influences came late and were more or less limited to the religious trends of the Eastern Church. Whatever streams of classical inheritance there were in Russia came via Western Europe, after Europe had already gone through the Middle Ages and the Renaissance and was approaching the French Revolution. Russia remained isolated for many centuries. When Ivan III, in 1480, threw off the yoke of the Mongolians who had overrun Russia, Europe was already at the great turn from medievalism to the Renaissance. When Rodrigo Borgia ascended the throne of St. Peter in 1492, the year America was discovered, Russia was still almost as isolated as China and had nothing to contribute to the Western World. Nor did she yet possess the curiosity and impulse to acquire and assimilate what Europe had to offer. When Galileo died and Newton was born in 1642, Francis Bacon had been dead for sixteen years and Shakespeare for twenty-six, but Russia was still deeply rooted in her own semi-Byzantine tradition, without a literature of her own, torn by civil strife, steeped in problems which were far from the scientific, artistic, and religious revolutions of Europe. Russia did not establish any definite cultural contact with Western Europe until the eighteenth century. The French Revolution was already in the making and a new economic class was about to enter the political scene of Europe; Russia was at the time still a vast feudal country with millions of serfs, an autocratic governing class, no middle class, and almost no industry.

The cultural contact with the Western World once established,

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Russia proved a capable and original pupil. Within one century, or not very much more than that, she not only became a legitimate member of the European cultural family but succeeded in making great contributions to that culture. Dostoyevsky, Tolstoy, and Tschaikovsky belong to the whole world as well as to Russia; the work of Mendelyeev in chemistry, Bechterev in neurology, and Korsakov in psychiatry became an integral part of European science; as early as 1818 Lobachevsky's contributions testified to the maturity of Russian mathematical scholarship and its revolutionary approach to the revision of Euclidian geometry. Now, some one hundred and fifty years after the French Revolution, hardly a century and one-half after Russia joined the Western World, Russia stands politically, economically, and scientifically a full equal and in many respects a superior to the old Western European tradition. Such phenomenal assimilation of centuries of European culture could not help but produce certain unique paradoxes.

Through the channels of institutional religion, England, the oldest parliamentary country in the world, found herself on rather intimate terms with Imperial Russia, the oldest and the most absolute autocracy in Europe until 1917. For generations the Bishop of Canterbury felt spiritually at home in the Holy Synod of the Russian Church Orthodoxy. The Russian liberal, academic intellectuals espoused the cause of constitutional, parliamentary government in the English tradition, while Russian imperial policy stood out as the logical enemy of British imperialism.

The revolutionary forces of Russia, coming from the lower economic strata, espoused the most advanced European economic theories, those of Marxism; these theories were based on problems which arose in the most industrialized countries of Europe, while Russia remained primarily agrarian and almost feudal to the very last day of the Empire. The cultural varnish of the upper classes became French; the industrial trends were taken mostly from Germany and only recently from America; the scientific methodology was as much German as it was French. Philosophy and literature and music remained singularly Russian. In short, the picture of Russian culture is truly kaleidoscopic. The history of Russian medicine, and particularly of psychiatry, reflects both the meteoric rise of Russian science and those especially Russian peculiarities which were not lost in the process of rapid assimilation of foreign importations.

These Russian peculiarities could be summarized very briefly; any aspect of Russian cultural efforts is permeated with the spirit of high humanitarian social aspirations for reform combined with a spirit of revolutionary struggle against the bureaucracy and the autocratic cruelty and stupidity of Russian political and economic absolutism. It is this social motif that reverberates through every step of Russian medical history. This is no less true of psychiatry, the youngest of all medical specialties, one not yet wholeheartedly accepted even by the medicine of the Western World. Psychiatry has its own history, and because psychological problems are more intimately connected with the development of religions and philosophy, psychiatry was delayed and almost stunted in its growth all over the world. It first languished outside medicine and later lagged behind it. Only within our time has psychiatry established itself as a legitimate branch of medicine and as a discipline which has succeeded in building its own methodological foundation and in developing its own scientific procedure. Russian psychiatry, while no exception in this respect, had a longer and more arduous road to cover.

There was no inkling of psychiatry in Russia till the latter part of the eighteenth century. The first retreat for the mentally ill in St. Petersburg was opened as late as 1779. France at that time already had a detailed classification of mental diseases produced by Boissier de Sauvages. Young Philippe Pinel, who was to revolutionize the care of the mentally ill, was already in Paris. Mesmer was known in Paris as well as in Vienna. How small and insignificant the retreat in St. Petersburg was one may deduce from the fact that five years after its opening it had but thirty-two rooms; in another five years—in the year the first shot of the French Revolution was fired—the number of rooms was increased to forty, ten of which were reserved for more affluent patients. By way of contrast, let us recall that there was a hospital for the mentally ill in Cairo five hundred years earlier. There was one in Valencia at the beginning of the fourteenth century. There was one in Saragossa around 1425, in Toledo in 1483, in Madrid in 1540, in Stockholm in 1551, and in Zürich in 1570. Bedlam was already an ancient institution in 1779. The York Lunatic Asylum was opened in 1777—it was three stories high and accommodated one hundred and eighty patients.

There were many mentally ill in Russia, of course. They wandered about in the streets and in the woods and some of them were taken

care of by the monasteries. But in one respect, Russia stands out as a happy exception in the otherwise gruesome history of psychiatry the world over. The European tradition of burning the mentally ill as witches did not develop independently in Russia, nor was it imported into Russia from Western Europe. Not being influenced by the Roman Catholic Church, Russian Church Orthodoxy, which has such a bloody and dark record in the political history of Russia, did not couple mental disease with Lucifer and produced no special theological psychiatry, nor did it have an Inquisition to raise the heated quarrels with the medical profession. The idea, if not the concept, that mental diseases are real diseases seems to have been established toward the beginning of the eighteenth century in Russia.

The following incident occurred in 1701. A psychotic by the name of Nikonov wandered among some guards who were on duty and told them the Tsar should be cursed because he had introduced into the Moscovite Tsardom such innovations as "German" stockings and shoes. Nikonov was arrested. An investigation was started but the offender could not be examined properly: "He screamed and threw himself about and used unintelligible words and spat on the image of the Holy Virgin. He was chained and held to a heavy trunk by three soldiers, but he broke away, fell to the floor, and snorted loudly for a long time; while doing so he fell asleep. The investigators concluded that the man was crazy and suffered from falling sickness." No mention was made in the report of any attending physician. On April 28, 1701, the Tsar himself issued a ukase to the effect that the miscreant be sent to a monastery for a month's observation in order to establish "what sickness and craze he may reveal." A month later the monastery reported that "no sickness or craze was found, that the man spoke no foolish words, and that he was on the whole in possession of his mind and reason." Thereupon the Tsar ordered that Nikonov, "in consequence of his misdemeanor and indecent language, be punished with a whip, then branded, and exiled to Siberia for life with his wife and children."¹

Peter the Great evidently understood the medicopsychological inadequacy of monasteries, and as early as 1723 he formally forbade sending the mentally ill to monasteries and ordered the construction of mental hospitals. But even the power of a despotic Tsar cannot overcome the inertia of his own bureaucracy or that of a historical tradition. Nothing

¹ U. Kannabich, *History of Psychiatry* (in Russian). State Publishing House, 1928.

was done. Almost forty years later, in 1762, the Senate ordered specifically that the psychotic prince Kozlovski "should not be sent to a monastery but to a special house which is to be built for this purpose, as is the custom in foreign lands, where they have established dollhouses—so be it."²

The origin of the term "dollhouse" is not clear. It is used frequently in the Russian psychiatric literature of the eighteenth and of the first part of the nineteenth century. It is apparently a perversion of the German *Tollhaus*, house for the insane.

There was no Russian physician at that time who could advise how to build a "dollhouse" in accordance with "the custom in foreign lands." The Senate inquired of the Academy of Sciences and a historiographer by the name of Muler provided the authorities with a brief description of what a "dollhouse" should be and what kinds of insane people there are. He recommended that a doctor be put in charge of such a house, and he stated definitely that the business of treating the mentally ill should be left in the hands of the physician. The priest, he said, had nothing to do with insane people until they come to their senses and regain their reason.

However, some years passed before finally the "yellow house," as they began to be called, opened. In 1766 an order was issued in St. Petersburg demanding that anyone who knew of or gave refuge to a mentally ill person should report the latter to the police. The police were very soon overwhelmed with reports. In 1776 a small "yellow house" was opened in Novgorod, and another in Moscow. As has been mentioned already, the capital of Russia did not have one until 1779. All were founded in the close neighborhood of monasteries and most even carried the names of the latter.

From this time on a series of hospitals opened all over Russia. In 1814 they were put under the supervision of a department of the Ministry of the Interior. By 1860 there were forty-three hospitals for the mentally ill in Russia—all small, all inadequately run, and all governed in the tradition of cruelty. The cautery, whips, chains, so-called "isolators"—more or less Russian editions of the European padded cells—were all used freely in the management of patients. In 1820 the Moscow "dollhouse" had twenty-five sets of chains for one hundred and thirteen patients.

² *Ibid.*

II

The years during and following the Napoleonic Wars brought Russia closer to European political thought and European scholarship. But the brief honeymoon of the sentimental liberalism of Alexander I ended in disappointment for those whose liberal hopes outlived the youthful impulses of the Russian Emperor. The Decembrist rebellion in 1825 ended with the complete triumph of autocracy. The reign of Nicholas I started with blood and continued in an atmosphere of darkest reaction. In the meantime, Russian economic life underwent the gradual but definite change which had characterized Europe two full generations earlier. A commercial and industrial class developed which was unable to make peace with the selfish, autocratic rule of Tsardom or to support the ruinous tradition of serfdom on which the ruling classes of the Russian Empire had fattened. The opposition of the newly born class served only to intensify the iron rule of autocracy. The country's needs grew; problems of public health, of building new hospitals, of caring for the mentally ill were all concentrated in the hands of a dull, complacent, and self-contained bureaucracy to which a well-organized secret police system was of greater value than measures of social welfare. Under the circumstances, psychiatry did not have the necessary opportunity to develop. Mental patients were not only treated with cruelty but even their most elementary needs were not provided for. They were fed atrociously, meat being served at only rare intervals; laundry was not provided; filth, hunger, and cruelty summarize briefly but poignantly the status of the mentally ill. In the words of a contemporary writer, the mental hospitals were "a branch of Dante's *Inferno*."

However, the fermentation of newer forces in Russia, once started, would not stop. Russian autocracy was forced to abolish serfdom in 1861, and by 1867 Russian bureaucracy had to yield a little more ground. It transferred the supervision of mental hospitals to the "zemstvos"—the semi-official, civic organizations which represented the major strivings of the new "third estate" for rational public welfare. Permission was given to the zemstvos and even to certain municipalities to build new hospitals. The need for physicians and surgeons was acute; greater still was the need for physicians trained in psychiatry.

The early 'sixties of the past century marked the true beginnings of

Russian psychiatry. In 1862 the short-lived "Society of Physicians for the Insane" was organized. This was the parent of the Petersburg Society of Psychiatrists, which was founded in 1880. How slowly psychiatry grew in Russia may be judged from the fact that out of the four hundred and forty physicians who attended the first all-Russian psychiatric meeting at Moscow, in January 1887, there were only eighty-six who specialized in the study and treatment of mental diseases. The very small number of psychiatrists was due not to the lack of interest. This interest was very great indeed, but there were no well-organized institutions where one could learn clinical psychiatry, nor was psychiatry taught in the medical schools.

It is easily seen that Russian psychiatry is hardly three-quarters of a century old, and that it began in an atmosphere of political strife, bureaucratic inefficiency, cultural darkness, and economic misery. The fact that within the short period of seventy to seventy-five years Russian neurology and psychiatry caught up with Europe and contributed to the world such men as Merjeyevski, Korsakov, Bechterev, and Pavlov testifies to the uniquely untiring and creative activity of Russian medical science, which found itself capable of overcoming the immense obstacles which the bleak autocratic regime, wars, and revolutions continually raised in its path.

The particular political and economic circumstances in which Russian psychiatry had to develop also determined its major trends. It was inspired with the ideal of building as many mental hospitals as possible, and of abolishing all forms of restraint. The nonrestraint movement inaugurated in England by Hill, Charlesworth, and Conolly, and associated primarily with the name of the latter, was a source of major inspiration to the Russians. The vicissitudes of this movement within Russia symbolized to a great extent the struggle for freedom which kept the country in a constant state of revolutionary fermentation till the end of the last War.

Next to nonrestraint and the creation of new hospitals, it was the education of the psychiatrist that stood in the foreground as a major problem. As to the scientific orientation of psychiatry, unlike Russia's literature and art or even some aspects of her political philosophy, it took a strictly materialistic turn rather narrowly conceived as neurobiological. The new contact with scientific Europe fascinated the Russian scholar, who sensed in it the rationalism and freedom of thought which

he craved so much and which stood in such contradiction to the superstitious and bigoted tradition inculcated into Russian life by Russian Church Orthodoxy and the political autocracy which used the latter as its tool. Biological materialism was in great vogue in the 'sixties. The most popular book was Büchner's *Stoff und Kraft*, which became a sort of guidebook and passport for scientific respectability. Turgenev described this trend beautifully in his *Fathers and Sons*. His Bazarov, the young physician who finally died of septicemia contracted at an autopsy, was typical of the time. He treated the idealistic fathers who still enjoyed playing 'cello music with a cold sneer and reproach. There was work to be done, there were things to be learned, there was a service to be rendered to the community, and all this musical sentimentality and leisurely romanticism had to be shed with scorn and determination. Since frogs were experimental animals, they were more valuable and therefore more important than a Beethoven. Even in his terminal delirium, Bazarov was preoccupied with dogs and not with mystical hallucinations.

Russian psychiatry, born at that period, established itself on a purely somatic and neurological basis. The first Russian professor of psychiatry was the pioneer, Balinsky. Balinsky graduated in medicine in 1856 and started specializing in pediatrics, which he soon abandoned. He went abroad to study and returned in 1867, in the same year the mental hospitals were turned over to the zemstvos. He took charge of the frightful psychiatric division of the Military Medical Academy, devoted himself to its reorganization, and made it a real hospital. He gave an immense amount of energy to the supervision of various projects for new mental hospitals all over European Russia. Balinsky was so busy with problems of psychiatric organization that he never had time to make any written contribution to psychiatry, and he always regretted it. Though he had no time for scientific research, he was an excellent, intuitive clinician. His influence as an inspired and inspiring teacher was incalculable.

Balinsky's somewhat younger contemporary and pupil, Merjeyevski, succeeded him as professor in 1877. Merjeyevski, rightly recognized as the father and dean of Russian psychiatry, was a great teacher and organizer. He trained more than fifty psychiatrists, eleven of whom taught psychiatry and occupied chairs of neurology and psychiatry. Twenty-six doctor's theses dealing with psychiatric subjects and one hundred and fifty scientific papers were written and published under his direction.

But unlike his predecessor Balinsky, Merjeyevski found time not only for teaching and organization but also for scientific research. He was in contact with European psychiatrists, particularly the French. His first study dealt with microcephalics; in this he tried to refute the new Darwinian hypothesis represented by Foltz which suggested that the brains of microcephalic individuals are related to those of anthropoid apes. Merjeyevski advanced the very keen and fruitful suggestion that the microcephalic brain was embryonic in nature. In 1872, jointly with Magnan, he made a study on the brain ventricles in general paralysis. In 1874, at the International Congress at Norwich, Merjeyevski described independently the giant pyramidal cells which became known as the cells of Betz, who was also a Russian neurologist, from Kiev. Merjeyevski was president of the first Congress of Russian Psychiatrists in 1887 and held the chair of psychiatry until 1893. He was the founder of a tradition which later became known as the Petrograd School and, since the Revolution, as the Leningrad School of Psychiatry. This school was later headed by V. M. Bechterev (1857-1927), who also became the occupant of Merjeyevski's chair of psychiatry in the Military Medical Academy.

In a brief review such as the present one, it is impossible to do justice to the many important features of Russian psychiatric history or even to mention all its worthy representatives. P. I. Kovaevsky was the first to establish psychiatry in the south of Russia, in the University of Kharkov. Bechterev established it in the University of Kazan, and Kojevnikov in Moscow. The University of Dorpat, being directly under the cultural influence of Germany, as was all the Baltic region of Russia, was led by German professors. Emminghaus, from Freiburg, occupied the chair of psychiatry at Dorpat from 1880 to 1886, and for four years, from 1886 to 1890, Kraepelin was the incumbent. Yet on the whole Russian psychiatry was more under the influence of French than of German psychiatry. Even in later years, when the influence of Kraepelin's nosology spread all over the world, there was opposition to Kraepelin in Russia. Serbsky, the successor of Korsakov in Moscow, was not alone in objecting to Kraepelin's suggestion that the major psychoses should be diagnosed on the basis of their ultimate outcome, on the basis of what would happen to a given patient in the future. When Kraepelin claimed that dementia praecox could be recognized by the fact that it usually ends in mental deterioration, he himself ad-

mitted that about thirteen per cent of dementia praecox patients do recover. Serbsky is said to have observed, not without caustic wonderment, "Those patients, then, are dementias which do not end in dementias?" He considered the Kraepelinian diagnostic suggestions not a little puzzling.

It was French psychiatry with its succinct logic and clarity of description that seemed to appeal more to the Russian psychiatrists. They stood closer to Morel, Magnan, Charcot, and Janet. That Merjeyevski published a joint paper with Magnan has been mentioned. Korsakov's meticulous neuropsychiatry was certainly reminiscent of the methods of Magnan and Charcot, and Bechterev's work was definitely in the tradition of Charcot and Pierre Janet.

III

By 1893, when Merjeyevski retired from active work, Russian psychiatry had established itself as far as its clinical and scientific methodology was concerned; it had also become a specialty, and it was represented by a number of well-trained and brilliant men. While Merjeyevski was laying the foundation of the Petersburg School, Moscow was developing more or less independently. The Moscow School is closely identified with the name of S. S. Korsakov.

Korsakov was born in 1854. He was not seventeen years old when he entered the Medical School of the University of Moscow. At the age of twenty-one he was already a member of the staff of the Préobrajensky Hospital in Moscow, and soon afterwards he became assistant to Kojevnikov, the pioneer of Moscow psychiatry. There was no really well-organized mental hospital in Moscow, nor was there any separate chair of psychiatry. Kojevnikov started giving a theoretical course in mental disease in 1863. Theretofore neurology and psychiatry had been a part of general pathology.

Not until 1887 was a good psychiatric clinic opened in Moscow. This clinic was built with the money donated by a private citizen (V. A. Morozova) in 1882. Kojevnikov was its first director, Korsakov was its factual head. How exiguous was the equipment offered at that time to a young physician interested in psychiatry one could judge from Korsakov's own reminiscences. "When I finished my medical course," he relates, "I came to the Préobrajensky Hospital in Moscow to apply for a job as physician. The physician-in-chief, a psychiatrist who en-

joyed a well-deserved good reputation, said to me: 'You were taught very little psychiatry in medical school, were you not? I am sure you don't even know how to tie down an insane person.' My first lesson was that of tying down. It is difficult to believe this—yet it all happened so very recently."³

Korsakov devoted himself to the liberation of the mentally ill; to the abolition of all measures of restraint, to the organization of the colony method of management. Through his efforts the "isolators" were abolished in 1895 and transformed into apartments for young physicians or chemical laboratories. His ideal of a mental hospital was one made up of a series of homelike, small houses in which patients were treated as sick people, as human beings. He achieved a great part of his ideal in a small colony for the mentally ill near Moscow. It was a gigantic task to which Korsakov devoted his inspiration and energy. His pupil Serbsky called this achievement "Korsakov's scientific work which was never published anywhere."

In accordance with the tradition of Russian psychiatry, Korsakov's efforts were organizational and humanistic, but he found time for intensive clinical research. He left a complete and rather voluminous classification of mental diseases which demonstrates great powers of observation and rich clinical experience. While he was interested in all aspects of psychiatry, Korsakov's chief interests were concentrated on the neuropsychiatric aspects of alcoholism. The choice of this interest was not accidental. Russia offered unusual opportunities for the study of alcoholism. The Tsarist regime was one of the major factors in the development of alcoholism, for alcohol was a monopoly of the state, under the direction of the Ministry of Finance. The Tsarist treasury was regularly replenished at the expense of the population, which was given a liberal opportunity to develop alcoholic addiction. The stores selling vodka were known in Russia not as saloons, but as "monopolkas." The workingman would enter the government store, would buy a bottle of vodka duly sealed with the government sealing wax, uncork it in the street at the door of the monopolka, and drink it straight without food or chaser. Alcoholism in Tsarist Russia was as typical and chronic a disease as was Tsardom itself.

Heavy drinking was so much a part of Russian life that it is reflected in a legend, probably apocryphal, about the adoption of the Greek

* *Ibid.*

Orthodox Christian faith by Russia. It was Prince Vladimir, later canonized by the Russian Church, who decided to espouse one of the monotheistic religions. He invited representatives of all existing religions; the Catholics, the Mohammedans, the Jews, and the Greek Orthodox sent delegates to bid Vladimir join their respective churches. Vladimir rejected the Catholics because a Russian prince, he averred, would pay no obeisance to anyone, even to the Prince of the Church. The Jews Vladimir rejected because their religion forbade eating pork. This was in the middle of the ninth century, and Russia was mostly what now is the Ukraine; the population raised a number of pigs, and Vladimir's rejection of the Mosaic religion seems to have been dictated by prudent economic considerations. The Mohammedans had even less to offer; on hearing that Mohammed forbade the use of intoxicating liquor, Vladimir is supposed to have become more explicit. "Russia," he claimed, "lives on the joy of drinking and cannot live without it." This reduced his choice to the Greek Orthodox Church, the tenets of which he accepted by mass baptism in 862. From that year on the Russian Tsars were devout rulers, ruling Russia and the obsequious church, which was an obedient servant of Tsardom and helpful in promulgating the theory of "the joy of drinking without which Russia could not live."

A little over one thousand years after the official consecration of Russian alcoholism, Korsakov made a studious examination of the clinical consequences of this legendary choice. It was at the first Congress of Russian Psychiatrists, which opened in Moscow on January 5, 1887, that Korsakov presented his first studies. The president of the Congress, Merjeyevski, reflected in his opening address the deep concern of Russian psychiatry—a concern which found its practical and creative expression only after the Soviet Revolution. The topic of the address was "The conditions which are conducive to the development of mental diseases in Russia, and the measures necessary for their prevention." Korsakov read two papers, one on the care of the mentally sick in private homes and the other on nonrestraint. Thus we may see that the sociological orientation of Russian psychiatry and its civic conscience came to full expression at that early date.

In the very same year, Korsakov submitted his thesis "On Alcoholic Paralysis." Two years later he published a paper entitled, "Some cases of a singular cerebropathy combined with polyneuritis." He worked out in detail not only the neurological picture of the alcoholic psychosis,

but also the psychological one—the typical memory disturbances, the characteristic, retrospective pseudologias and fabrications.

Korsakov was a quiet, unassuming, modest worker; he even gave the impression of being insecure. His was the true attitude of a scientist in whom modesty and greatness were perfectly integrated. At the International Congress of Medicine in Paris, in 1900, Professor M. Ritti, speaking in memory of Korsakov, recalled: "It was at the International Congress in 1889. I remember vividly how Korsakov came over to me modestly, almost timidly; his characteristic face reflected a vital, keen mind, goodness and endless gentleness. His was the nature of an apostle and of a scientist. He had in his hands a manuscript and asked my permission to present it; it was not scheduled on the program. I was glad to give him permission. You all know the monumental contribution which this happened to be, a contribution which opened a new era in our science. It was entitled simply: 'A form of mental disease which is combined with degenerative polyneuritis.' The paper was received with warmest applause. The great scientist who presided over that meeting was Professor Benedict of Vienna. This man of vast knowledge and incontestable competence evaluated that highly original paper with the following words: 'We thank Doctor Korsakov for his interesting paper. He has confirmed to the highest degree the theory that all psychopathology can be reduced to lesions of the brain and nerve-tissue in general.'"

As we know now, Benedict's hopes were too expansive, although they are still cherished by many today. Benedict's at the time more obscure colleague and compatriot, Sigmund Freud, was already back from Paris where he had worked with Charcot, and together with Joseph Breuer he was initiating an even greater revolution in psychopathology than was Korsakov's in the consideration of alcoholic reactions. This is noted, not to deter from the greatness of Korsakov, but rather to emphasize the fact that while European psychiatry was studying hysteria, revealing a new insight into neuroses, and preparing a new theory of psychopathology, Russian psychiatry seemed in a strange way to neglect the whole field of neuroses and to concentrate on the neuropathological conditions which were brought into focus by the special social and cultural circumstances in which Russia lived.

At the International Congress of Medicine held in Moscow in 1897, the Berlin neurologist Jolly proposed that the alcoholic psychosis de-

scribed by Korsakov be called the Korsakov Psychosis, which is the official term used in all psychiatric classifications today.

Korsakov's career left an indelible imprint on the history of Russian psychiatry, and the period in which he lived and wrote is known as the "era of Korsakov." Korsakov died on May first, 1900, closing less than half a century of exceptionally eventful psychiatric history.

IV

The twentieth century opened rather inauspiciously. The Russo-Japanese War, the tempestuous revolutionary upheavals, the famines and the persecutions on the part of the Tsarist regime hampered Russian culture and Russian science, disturbed and disrupted Russian life, till finally the structure of Tsarist Russia crumbled, as one day it had to, in March and November, 1917.

The special conditions of Russian political and social history only enhanced the scientific and cultural orientation of Russian psychiatry. As everywhere else in Europe throughout the nineteenth century, psychiatry was not psychological but administrative, custodial, descriptive, and neurological. The deep-seated human psychological conflicts, the inner tragedies of man's relation to himself and to the outside world, were still as if by general, silent consent considered as belonging more to literature than to psychiatry. The psychological aspects of psychiatry were left in Russia to Dostoyevsky as much as they were left in France to Hugo, Dumas the younger, Maupassant, and Proust, or in Sweden to Strindberg, or in Norway to Hamsun. The old, mistaken view that psychiatry, in order to be scientific, must be objective—that is, must leave the subjective states, the ideational content, out of consideration in favor of their neurophysiological equivalents—prevailed in Russia perhaps to a greater degree than in the rest of Europe. The term "neuro-psychiatry," which is more or less new in English speaking countries, is an old term in Russia.

The twentieth century is marked by the development of what has become known as *objective psychology*, or *reflexology*. These terms were introduced by Bēchterev. The history of this period is too recent, and a proper historical evaluation of it is not yet timely. Suffice it to say that already there are signs of considerable distortion of the historical perspective regarding the recent trends of Russian psychiatry, and an attempt to correct this distortion may not be out of place.

The reflexological ideas in psychiatry are not very recent. Almost one hundred years ago Griesinger spoke of "the reflexes of the brain," and in 1863 the Russian neurologist Syechenov published a monumental work entitled, *The Reflexes of the Brain*. The work of I. P. Pavlov was purely physiological, and for a long time Pavlov failed to deal with the possible psychological implications of his experiments. He never actually worked on human beings, and he never subjected the variety of emotional subjective states of human beings to experimental evaluation. Having been a direct witness of this page of Russian psychiatric history, I may be permitted to testify that the first reflexological experiments on human beings were made by Bechterev in the Psycho-Neurological Institute in Petrograd as early as 1912, and at that time Bechterev was already giving a course on "Objective Psychology or Reflexology." His *Objective Psychology*, in three volumes, was published between 1907 and 1912 and was translated into French and German. His *Foundation of Reflexology of Man* was published in 1918, and his *Collective Reflexology* in 1921. All these contributions were for some reason overlooked both in America and in England.

Pavlov's great contribution to the subject of conditioned reflexes remained outside medical psychology, and the recent theoretical constructions of what has become prematurely known as Pavlov's School do not go beyond a general neurophysiological theory. The so-called "experimental neuroses" in animals do not offer any conclusive results, in so far as the behavior of these "neurotic" animals is interpreted by the experimenter on the basis of his subjective impressions only. There is no proof that the animals actually labor under the stress of a psychological conflict. On the other hand, the method of Bechterev, while still more related to behaviorism than to true analytical psychology, nevertheless deals directly with human beings and therefore represents actual psychiatric work.

The last twenty-five years, the most interesting and valuable in the history of Russian medicine, mark more poignantly than ever before the sociological and neurophysiological orientation of Russian psychiatry. Since the Soviet Revolution, psychiatry has become a branch of public health when it is not a field of laboratory research. What is known here as "mental hygiene" has become the chief field of Russian psychiatric endeavor. Numerous clinics in municipalities and in industrial centers have been opened, and the whole working population is

brought into the orbit of psychological supervision and educational efforts. Psychiatry, to use the words of the great leader of Soviet psychiatry, L. M. Rosenstein, has become a system for "the protection of neuropsychic health." Sanatoria for borderline cases and for neuroses have been organized. These are psychotherapeutic and physiotherapeutic centers. Social hygiene and prophylaxis are the guiding principles.

The accent is on purely cultural factors. As the Russian historian of psychiatry, Kannabich, summarizes it briefly, "The study of the cultural conditions and of the influence of environment, the concentration of special attention on the role of social factors and psychogenic moments, leads more and more to the rejection of the endogenous and to the increasing acceptance of the exogenous forms" in the consideration of psychopathological reactions.